

LODI PARKS & RECREATION DEPARTMENT
125 N. STOCKTON ST. – LODI CA 95240
Office: 333-6742 or Adult Sports Supervisor: 333-6800 x450

**LODI ADULT SPORTS
PLAYER ADDITION / RELEASE FORM**

I, the undersigned player, acknowledge, agree, and understand that:

1. Voluntarily and of my own free will, I elect to participate as a member of the team and league indicated below.
2. I understand that there are certain risks and hazards involved in participating in sports that may result in injury or death to me or other players, including, but not limited to, those hazards associated with weather conditions, playing conditions, equipment and other participants.
3. I understand that the very nature of athletics is hazardous and risky, including, but not limited to, the acts of running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players.

Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated below and in consideration for permission to play on the fields arranged for by the team or league:

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me, (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
2. I release, discharge, and agree not to sue the team and league designated below, the field owner or other entity designated below, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field, for any claim, damages, costs, or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause, including but not limited to, the negligence, breach of contract, or wrongful conduct of the parties hereby released.

_____ Name of Team	LODI PARKS AND RECREATION DEPT. _____ Name of League	CITY OF LODI AND/OR LODI UNIFIED SCHOOL DISTRICT _____ Field Owner/Other Entity
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I ACKNOWLEDGE I HAVE READ AND I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY, AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

_____ Name of Player (Print)	_____ Signature of Player	_____ Date
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I SOLEMNLY AGREE TO THE ADDITION OF THE FOLLOWING PLAYER ON THE (TEAM NAME) _____
_____ TEAM IN _____ DIVISION FOR THE REMAINDER OF THE 2000 SEASON.

NAME _____ SIGNATURE _____
 LAST FIRST M

ADDRESS _____ CITY _____ ZIP _____ PHONE _____

ADD _____ DROP _____ TEAM RELEASED FROM _____

I UNDERSTAND THAT THE ABOVE MENTIONED PLAYER IS ONLY ELIGIBLE TO PARTICIPATE IF IT IS AGREED BY A SIMPLE MAJORITY OF THE MANAGERS OF THAT PARTICULAR LEAGUE. NOTE: MANAGERS WILL ACCEPT ALL RESPONSIBILITY REGARDING ANY AND ALL PLAYER ADDITIONS OR RELEASES. BE SURE YOU ARE AWARE OF WHAT EFFECT A PLAYER ADDITION MAY HAVE ON YOUR TEAM AND LEAGUE.

<u>DIVISION MANAGER'S SIGNATURE</u>	<u>TEAM</u>	<u>DATE</u>
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1. _____
2. _____
3. _____
4. _____

_____ TEAM MANAGER	_____ DATE
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